- (ii) Meet the State requirements for qualification of family nurse practitioners in the State in which he or she furnishes the services.
- (2) If the State does not specify, by specialty, qualifications for family nurse practitioners, but the State does define qualifications for nurses in advanced practice or general nurse practitioners, the practitioner must—
- (i) Meet qualifications for nurses in advanced practice or general nurse practitioners as defined by the State; and
- (ii) Have a family nurse practice limited to providing primary health care to individuals and families.
- (d) Payment for nurse practitioner services. The Medicaid agency must reimburse nurse practitioners for their services in accordance with §441.22(c) of this subchapter.

[60 FR 19861, Apr. 21, 1995]

§ 440.167 Personal care services.

Unless defined differently by a State agency for purposes of a waiver granted under part 441, subpart G of this chapter—

- (a) Personal care services means services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded, or institution for mental disease that are—
- (1) Authorized for the individual by a physician in accordance with a plan of treatment or (at the option of the State) otherwise authorized for the individual in accordance with a service plan approved by the State;
- (2) Provided by an individual who is qualified to provide such services and who is not a member of the individual's family; and
- (3) Furnished in a home, and at the State's option, in another location.
- (b) For purposes of this section, family member means a legally responsible relative.

[42 FR 47902, Sept. 11, 1997]

§ 440.168 Primary care case management services.

(a) Primary care case management services means case management related services that—

- (1) Include location, coordination, and monitoring of primary health care services; and
- (2) Are provided under a contract between the State and either of the following:
- (i) A PCCM who is a physician or may, at State option, be a physician assistant, nurse practitioner, or certified nurse-midwife.
- (ii) A physician group practice, or an entity that employs or arranges with physicians to furnish the services.
- (b) Primary care case management services may be offered by the State—
- (1) As a voluntary option under the State plan; or
- (2) On a mandatory basis under section 1932 (a)(1) of the Act or under section 1915(b) or section 1115 waiver authority.

[67 FR 41115, June 14, 2002]

§ 440.169 Case management services.

- (a) Case management services means services furnished to assist individuals, eligible under the State plan who reside in a community setting or are transitioning to a community setting, in gaining access to needed medical, social, educational, and other services, in accordance with §441.18 of this chapter
- (b) Targeted case management services means case management services furnished without regard to the requirements of §431.50(b) of this chapter (related to statewide provision of services) and §440.240 (related to comparability). Targeted case management services may be offered to individuals in any defined location of the State or to individuals within targeted groups specified in the State plan.
 - (c) [Reserved]
- (d) The assistance that case managers provide in assisting eligible individuals obtain services includes—
- (1) Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social, or other services. These assessment activities include the following:
 - (i) Taking client history.
- (ii) Identifying the needs of the individual, and completing related documentation.